

Notice of Rulemaking Hearing  
The Tennessee Department of Human Services  
Division of Medical Services  
Family Assistance Division

FS 06-40-01  
DB10 677-678

There will be hearings before the Tennessee Department of Human Services to consider the promulgation of amendments to rules pursuant to Tennessee Code Annotated §§ 4-5-201 et seq. and 71-1-105(12). The hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, § 4-5-204 and will take place in the following locations:

- (1) Memphis, Tennessee: August 28, 2007, 6:30 p.m., Second Floor Auditorium, Donnelly J. Hill State Office Building, 170 North Main Street, Memphis, TN 38103;
- (2) Nashville, Tennessee: August 29, 2007, 1:30 p.m., 2nd Floor Board Room, Citizens Plaza State Office Building, 400 Deaderick Street,, Nashville, TN 37248;
- (3) Knoxville, Tennessee: August 30, 2007, 1:30 p.m., Knoxville State Office Building, 7th Floor, 531 Henley Street, Conference Room B, Knoxville, TN 37902.

Any individuals with disabilities who wish to participate in these proceedings or to review these filings should contact the Department of Human Services to discuss any auxiliary aids or services needed to facilitate such participation. Such initial contact may be made no less than ten (10) days prior to the scheduled meeting date or the date the party intends to review such filings to allow time for the Department of Human Services to determine how it may reasonably provide such aid or service. Initial contact may be made with the Department of Human Services' ADA Coordinator, Natasha Webster, at Citizens Plaza Building, 400 Deaderick Street, 15<sup>th</sup> Floor, Nashville, Tennessee 37248, telephone number (615) 313-4731 (TTY)-(800) 270-1349.

For a copy of the proposed rule contact: Kim Beals, Deputy General Counsel, Department of Human Services, Citizens Plaza Building, 400 Deaderick Street, 15<sup>th</sup> Floor, Nashville, TN 37248, telephone number (615) 313-4731.

Substance of Proposed Rules  
of  
The Tennessee Department of Human Services  
Division of Medical Services

Chapter 1240-3-3  
Technical and Financial Eligibility Requirements for Medicaid

Amendments

Rule 1240-3-3-.02, Technical Eligibility Factors, is amended by deleting paragraph (9) in its entirety and by substituting instead the following language so that, as amended, paragraph (9) shall read as follows:

- (9) Institutionalized individuals in a medical institution (i.e., one organized to provide medical care, including nursing and convalescent care) must be continuously confined for thirty (30) consecutive days prior to attaining Medicaid eligibility based on institutionalization. Medicaid eligibility is retroactive to the latter of: a) the date of admission; or b) the date of application when thirty (30) consecutive days of institutionalization is met. Coverage of Home and Community Based Services [HCBS] requires a determination that the individual needs, and is likely to receive, HCBS services for thirty (30) consecutive days going forward.

Authority: T.C.A. §§ 4-5-201 et seq., 4-5-209, 71-1-105(12), 71-5-102, 71-5-109, 71-5-120 and 71-5-141; 8 U.S.C. §§ 1611, 1612, 1613, and 1641, 42 U.S.C. § 1315, 42 USC §§ 1382c(a)(3) and (4), 42 U.S.C. §§ 1396 et seq., 42 U.S.C. § 1396a(a)(10)(A)(ii)(I) and (V); 42 U.S.C. § 1396b(v)(1) and (x)(1), (2) and (3); and 42 U.S.C. 1396n(c); 42 C.F.R. §§ 435.210, 435.300, 435.301, 435.403, 435.406, 435.407, 435.530, 435.540, and 435.622; PL 104-193 §§ 401, 402, 403 and 431 and PL 109-171 § 6036; and 71 FR 39214 (July 6, 2006); TennCare Medicaid Section 1115 Demonstration Waiver.

Substance of Proposed Rules  
of  
The Tennessee Department of Human Services  
Family Assistance Division

Chapter 1240-1-6  
Medicaid Coverage AFDC Only

Amendments

Rule 1240-1-6-.02, Authorizing Medical Benefits, is amended by replacing the language of the current rule in its entirety so that, as amended, the rule will read as follows:

Medicaid eligibility begins the later of the date the signed application was received at DHS or date the newborn is otherwise determined eligible or the date of birth of newborn. The newborn is deemed to have applied for Medicaid and to be eligible on date of birth if the mother is eligible for and receiving Medical Assistance at the time. Medicaid benefits continue for the newborn until the child attains age one (1).

Authority: TCA §§14-3-102 and 14-8-106, 45 CFR 206.10, PL 97-35, PL 98-369 §2362; TennCare Medicaid Section 1115 Demonstration Waiver.

Substance of Proposed Rules  
of  
The Tennessee Department of Human Services  
Family Assistance Division

Chapter 1240-1-6  
Medicaid Coverage AFDC Only

Repeals

Rule 1240-1-6-.03, Retroactive Medicaid Coverage, is repealed.

Authority: TennCare Medicaid Section 1115 Demonstration Waiver.

Legal Contact or Party who will approve final copy:

Kim Beals  
Deputy General Counsel  
Citizens Plaza Building, 15<sup>th</sup> Floor  
400 Deaderick Street  
Nashville, Tennessee 37248-0006  
(615) 313-4731

Contact for disk acquisition:

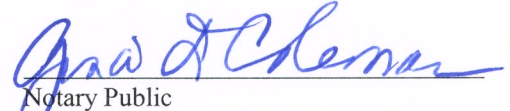
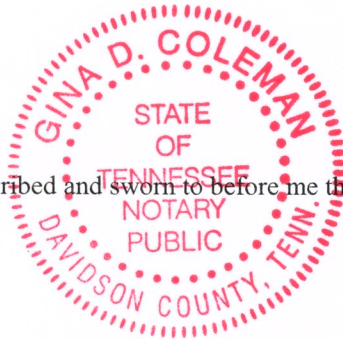
Alan Buescher  
Legal Assistant  
Citizens Plaza Building, 15<sup>th</sup> Floor  
400 Deaderick Street  
Nashville, Tennessee 37248-0006  
(615) 313-4731

I certify that this is an accurate and complete representation of the intent and scope of rulemaking proposed by the Department of Human Services.



Kim Beals  
Deputy General Counsel  
Tennessee Department of Human Services

Subscribed and sworn to before me this 29<sup>th</sup> day of June, 2007.

  
Notary Public

My commission expires on the 25<sup>th</sup> day of July, 2009

The notice of rulemaking set out herein was properly filed in the Department of State on the 29<sup>th</sup> day of June, 2007.



Riley C. Darnell  
Secretary of State

By: 